Case 16-13147-SLM Doc 54 Filed 12/28/16 Entered 12/28/16 15:11:18 Desc Main Document Page 1 of 5

Fil	I in this information to identify your ca	ise:			1000				
	ebtor 1 Maria Arvelo								
	ebtor 2 ouse, if filing)								
Ur	nited States Bankruptcy Court for the:	DISTRICT OF NEW J	ERSEY, NEWARK DI	/ISIOI	N				
Ca	se number 2:16-bk-13147	32.00			_	Check if this is	•		
(If k	(nown)					An amende	흰		
	Wieiel Ferman 4001					☐ A suppleme			chapter 13
1	fficial Form 106I					MM / DD/ Y	YYYY		
	chedule I: Your Inco								12/15
spo atta	as complete and accurate as possically ing correct information. If you are separated and your ich a separate sheet to this form. Out 1: Describe Employment	are married and not filing spouse is not filing with	J jointly, and your spo	ouse i	s living w	ith you, inclu	de informati	on about y	our
1.	Fill in your employment information.		Debtor 1			Debtor 2	or non-filir	ıq spouse	
	If you have more than one job,	F	■ Employed			☐ Emple	The second second		
	attach a separate page with information about additional employers.	Employment status*	☐ Not employed			☐ Not e	☐ Not employed		
		Occupation	See Schedule At	ache	ed				
	Include part-time, seasonal, or self-employed work.	Employer's name							
	Occupation may include student or homemaker, if it applies.	Employer's address							
		How long employed the		hmen	t for Addi	tional Employ	ment Inform	nation	
Par	t 2: Give Details About Mont	hly Income				Employ	mont imorn	iation	
sti inle	mate monthly income as of the date ss you are separated.	you file this form. If you	have nothing to report	for ar	ıy line, writ	e \$0 in the spa	ce. Include y	our non-filin	g spouse
you	u or your non-filing spouse have more e, attach a separate sheet to this form	than one employer, combir	ne the information for a	l emp	oyers for the	hat person on t	he lines belo	w. If you nee	ed more
					For	Debtor 1	For Debto		
2.	List monthly gross wages, salary, deductions). If not paid monthly, calc	and commissions (befoculate what the monthly wa	re all payroll age would be.	2.	\$	2,011.83	\$	N/A	
3.	Estimate and list monthly overtime	e pay.		3.	+\$	0.00	+\$	N/A	
1.	Calculate gross Income. Add line	2 + line 3,		4.	\$2	2,011.83	\$	N/A	

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Del	otor 1	Arvelo, Maria		Case	number (if known)	2:16-bk-1	3147
				For	Debtor 1	For Debto	
	Cop	y line 4 here	4.	\$_	2,011.83	\$	N/A
5.	List	all payroll deductions:					
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	145.93	\$	N/A
	5b.	Mandatory contributions for retirement plans	5b.	<u> </u>	0.00	\$	N/A
	5c.	Voluntary contributions for retirement plans	5c.	\$-	0.00	\$	N/A
	5d.	Required repayments of retirement fund loans	5d.	\$-	0.00	\$	N/A
	5e.	Insurance	5e.	\$	0.00	\$	N/A
	5f.	Domestic support obligations	5f.	\$	0.00	\$	N/A
	5g.	Union dues	5g.	\$	0.00	\$	N/A
	5h.	Other deductions. Specify:	5h.+	\$	0.00	+ \$	N/A
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	145.93	\$	N/A
7.	Calc	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	1,865.90	\$	N/A
8.		all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$			
	8b.	Interest and dividends	8b.	÷-	0.00	\$	N/A
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.		*-	0.00	\$	N/A
	8d.	Unemployment compensation	8c.	\$_	0.00	\$	N/A
	8e.	Social Security	8d. 8e.	* *	0.00	\$	N/A
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.	\$_ \$	0.00	\$	N/A
	8g.	Pension or retirement income	8g.	\$	0.00	\$	N/A
	8h.	Other monthly income. Specify: Help from son	8h.+	\$_	1,525.00	\$	N/A
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	1,525.00	\$	N/A
10.		ulate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$_		3,390.90 + \$_	N/A	= \$3,390.90
11.	other	all other regular contributions to the expenses that you list in Schedule and contributions from an unmarried partner, members of your household, your defiriends or relatives. It include any amounts already included in lines 2-10 or amounts that are not availy:	pendent				+\$ 0.00
12.	Add to Write	the amount in the last column of line 10 to the amount in line 11. The resu that amount on the Summary of Schedules and Statistical Summary of Certain	It is the o	combi and	ned monthly inco Related Data, if it	me. applies 12.	\$ 3,390.90
3.	Do yo	ou expect an increase or decrease within the year after you file this form? No. Yes. Explain:					Combined monthly income

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Debtor 1	Arvelo, Maria	Case number (if known)	2:16-bk-13147

Official Form B 6I Attachment for Additional Employment Information

Debtor		
Occupation		
Name of Employer	Dollar Tree Stores	
How long employed		
Address of Employer		
Debtor		
Occupation	Consultant	
Name of Employer	Investigroup	
How long employed	N	
Address of Employer	1282 Liberty Ave Hillside, NJ 07205-2034	

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	in this information to identify your case:				
Deb	otor 1 Maria Arvelo		Che	eck if this is:	
		-		An amended filing	
Deb	tor 2		_		ving postpetition chapter 1:
(Sp	buse, if filing)			expenses as of the	following date:
Unit	ed States Bankruptcy Court for the: DISTRICT OF NEW JERSEY, NEW DIVISION	WARK		MM / DD / YYYY	
Sec. 213.538	e number 2:16-bk-13147 nown)				
0	fficial Form 106J				
S	chedule J: Your Expenses				12/1
into	as complete and accurate as possible. If two married people are formation. If more space is needed, attach another sheet to this for nown). Answer every question.	iling together, both rm. On the top of a	n are equa ny additio	lly responsible for s nal pages, write you	supplying correct ur name and case numbe
Par					
1.	Is this a joint case?	<u> </u>			
	No. Go to line 2.				
	☐ Yes. Does Debtor 2 live in a separate household?				
	□ No				
	Yes. Debtor 2 must file Official Form 106J-2, Expenses fo	r Separate Househo	old of Debte	or 2.	
2.		(5)			
	S PANY BOS SI S				
	Do not list Debtor 1 and	Dependent's relation Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	Do not state the				□ No
	dependents names.				□ No □ Yes
		×		_ :	☐ Yes
					☐ Yes
		-			William Committee
					□ No
					☐ Yes
					П.,
		,			□ No
l.	Do your expenses include			-	□ No □ Yes
3.	expenses of people other than				
3.				- (
art	expenses of people other than yourself and your dependents? 2: Estimate Your Ongoing Monthly Expenses				☐ Yes
Part	expenses of people other than yourself and your dependents? 2: Estimate Your Ongoing Monthly Expenses nate your expenses as of your bankruptcy filing date unless your	are using this forr	n as a sup	plement in a Chapte	☐ Yes
expe	expenses of people other than yourself and your dependents? 2: Estimate Your Ongoing Monthly Expenses mate your expenses as of your bankruptcy filing date unless your expenses as of a date after the bankruptcy is filed. If this is a supplemental to the supplemental	are using this forn	n as a sup check the	plement in a Chapte box at the top of th	☐ Yes
expe	expenses of people other than yourself and your dependents? 2: Estimate Your Ongoing Monthly Expenses mate your expenses as of your bankruptcy filing date unless you enses as of a date after the bankruptcy is filed. If this is a supplementable date.	nental <i>Schedule J</i> ,	n as a sup check the	plement in a Chapte box at the top of th	☐ Yes
ent stii xpe ppl	expenses of people other than yourself and your dependents? 2: Estimate Your Ongoing Monthly Expenses nate your expenses as of your bankruptcy filing date unless you enses as of a date after the bankruptcy is filed. If this is a supplemicable date.	nental <i>Schedule J</i> ,	n as a sup check the	plement in a Chapte box at the top of th	☐ Yes
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Part Estin expe appl mclu valu Offi	expenses of people other than yourself and your dependents? 2: Estimate Your Ongoing Monthly Expenses mate your expenses as of your bankruptcy filing date unless you enses as of a date after the bankruptcy is filed. If this is a supplem icable date. Ide expenses paid for with non-cash government assistance if you e of such assistance and have included it on Schedule I: Your Indicial Form 1061.) The rental or home ownership expenses for your residence. Inclupayments and any rent for the ground or lot. If not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses	ou know the come	4. \$ 4a. \$ 4b. \$	Your expe	er 13 case to report te form and fill in the enses 2,472.18 0.00 0.00

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De	btor 1	Arvelo	, Maria	Case nu	mber (if known)	2:16-bk-13147
6.	Utili	ties:				
152	6a.		ty, heat, natural gas	6:	ı. \$	35.00
	6b.		sewer, garbage collection		o. \$	82.00
	6c.		ne, cell phone, Internet, satellite, and cable services		. \$	150.00
	6d.	Other. S			i. \$	0.00
7.	Foo	d and hou	sekeeping supplies	1000	. \$	180.00
8.			children's education costs	. 8	. 60 .	0.00
9.	Clot	hing, laun	dry, and dry cleaning		. s ———	50.00
10.			products and services		. \$	50.00
			ental expenses		. \$	35.00
	Tran	sportation	n. Include gas, maintenance, bus or train fare. car payments.		. \$	100.00
13.	Ente	ertainment	t, clubs, recreation, newspapers, magazines, and books		. s ———	30.00
14.	Cha	ritable cor	ntributions and religious donations		. \$	
		rance.		17		0.00
	Do n	ot include	insurance deducted from your pay or included in lines 4 or 20.			
	15a.	Life insu	rance	15a	. \$	0.00
		Health in		15b	. \$	0.00
		Vehicle in		15c	. \$	120.00
			surance. Specify:	15d	. \$	0.00
16.	Taxe	s. Do not i	include taxes deducted from your pay or included in lines 4 or 20.		***************************************	0.00
17	Spec			16	. \$	0.00
17.	17a	Car paym	lease payments: nents for Vehicle 1		2	
			nents for Vehicle 2	17a		0.00
		Other. Sp		17b	17/68	0.00
		Other, Sp		17c	1 1 1 1	0.00
18			s of alimony, maintenance, and support that you did not report	17d	. \$	0.00
	dedu	cted from	your pay on line 5, Schedule I, Your Income (Official Form 106)	as 1\ 18	\$	0.00
19.	Othe	r payment	ts you make to support others who do not live with you.	1).	\$	17,1000E
	Spec	ify:	2	19.	· —	0.00
20.	Othe	r real prop	perty expenses not included in lines 4 or 5 of this form or on Sc	hedule I: You	ır Income.	
	20a.	wortgage	es on other property	20a.		0.00
		Real esta		20b.	\$	0.00
	20c.	Property,	homeowner's, or renter's insurance	20c.	\$	0.00
	200.	Maintenar	nce, repair, and upkeep expenses	20d.	\$	0.00
04			ner's association or condominium dues	20e.	\$	0.00
21.	Otnei	r: Specify:		21.	+\$	0.00
22.	Calcu	ulate your	monthly expenses			
			through 21.		\$	2 204 19
	22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		-2	\$ ——	3,304.18	
	22c. A	Add line 22	a and 22b. The result is your monthly expenses.	_	\$	
23			monthly net income.			3,304.18
20.	23a	Conv line	12(your combined monthly income) from Schedule I.			
	23b	Copy vour	r monthly expenses from line 22c above.	23a.		3,390.90
	200.	copy your	monthly expenses from line 22c above.	23b.	-\$	3,304.18
	23c.	Subtract v	your monthly expenses from your monthly income.			7
		The result	t is your monthly net income.	23c.	\$	86.72
.	_					30.72
	modific	cation to the	an increase or decrease in your expenses within the year after you expect to finish paying for your car loan within the year or do you expect y terms of your mortgage?	you file this f our mortgage p	orm? ayment to increas	se or decrease because of a
	No.					
	☐ Yes	s.	Explain here:			